Name: <u>Mary Mallon</u> Medicaid # <u>1039424AM31812</u> ISP Start: <u>4/1/21</u> End: <u>3/31/22</u> Revision:

Personal Preferences (Sample) **Person Centered Plan Outcome(s)** (addressed in this service from the PC ISP Shared Plan): Insert the Outcomes for personal assistance, respite, or companion from the Part III (Shared Plan) Traits or qualities preferred in those who support the individual: Gentle, soft spoken, talkative, sense of humor, reliable, trustworthy For individuals who do not speak: I make eye contact and my eyes widen like I'm excited. This is how I communicate "yes": I turn my head away from you. This is how I communicate "no": I smile and shake my head from side to side when I'm happy. I tuck my Other information about how I chin to my chest and may cry when I'm sad or frustrated. I may make a loud noise when I'm angry. I giggle if I'm embarrassed. communicate: People who support with intimate needs: List the people (paid and unpaid) who are acceptable to the individual for intimate supports (such as bathing, personal hygiene, feminine care, lifting/transferring/positioning, dressing, restroom): My mom, Sara (Aide), and Jenny (Aide) Below are specific preferences when providing supports: **Supports** Personal preferences/What's important to me: Be gentle and talk to me while you are lifting, transferring, or Lifting/transferring/positioning: positioning me. Chop my food into small bites. I like to eat slowly so don't rush me. Eating/meal preparation: Either talk to me, read to me, or play music for me while I'm eating. I like a warm shower while I sit on my shower chair. I don't like the **Bathing/showering:** shower spraying in my face so wash my face with a wash cloth. Skin care/personal appearance: I like Bath and Body Works ginger scented lotion. I like my hair to be brushed and neat. I like fresh clean clothes that match. I really like to look nice. After **Dressing:** you help me get dressed, I want to see myself in a mirror. I like as much privacy as possible. Please check with me frequently. Restroom: I get urinary tract infections easily. I'll let you know that I'm frustrated (see above – communication) if I need assistance changing in between times that you ask me. While you assist me with changing my undergarment, don't talk to me and be gentle. Make sure I am completely clean before assisting me with putting on a clean Poise (preferred brand) undergarment. Please see above for people who can support me with feminine care. Feminine care: An Always with Wings pad should be placed in my undergarment. Follow the same preferences stated in the restroom section. I like my room to be neat and clean. I'm allergic to dust so I need to Home care:

ATTACH THIS SUPPLEMENTAL PAGE TO THE DMAS 97 A/B FOR THE DD WAIVER

wear a soft cloth mask while cleaning my room. I like to be helpful so see my support plan on how you can assist me to do some dusting.

Name: Mary Mallon Medicaid # 1039	9424AM31812 ISP Start: 4/1/21 End: 3/31/22 Revision:
Money management:	My mom manages my money, but I like to carry money in my wallet
	in my purse.
Community:	I enjoy going out and talking with people, but I don't like large
	crowds. Please refer to my Communication Chart in my main file to
	learn how to assist me with talking with people.
Other: Nail care	I like my finger and toe nails to be clean and short. I also like my
	finger and toe nails to be painted. Please offer me a choice of colors
	so I can make the selection. Once a month I get a professional
	manicure and pedicure at Nail Spa near my house. I go there because
	I have friends that work there. I want the full package deal.
Comments: A message from Mom. As you learn about additional preferences, let me know so I can have	
the information added to this document. Mary is a very good teacher. You just have to know her and listen	
with your eyes and your ears.	

Completed by: George Smith Date completed: 3/17/21

<u>Important information for completing the Personal Preferences Tool:</u>

- -Talk to the person, their family, and others who know them the best when completing this tool in order to get detailed, accurate information about the person's preferences while being supported.
- -Be sure to include details about what is important to the person. What is important to a person includes those things in life which help us to be satisfied, content, comforted, fulfilled, and happy. It includes:
 - -People to be with /relationships
 - -Culture & Identity
 - -Purpose and Meaning
 - -Status and control
 - -Things to do and Places to go
 - -Rituals or routines
 - -Rhythm or pace of life
 - -Things to have (preferred items- including preferred brands)
- -As you learn more about the person and their preferences, add to the Personal Preferences Tool so all supporters can deliver support in a consistent way in the manner that works best for the person.

ATTACH THIS SUPPLEMENTAL PAGE TO THE DMAS 97 A/B FOR THE DD WAIVER